

Work Order ID 93801

93801

Page 1

November-27-12 11:24:48 AM

Item ID: 647.1712

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Gusset

Stop

NS2

Start Date: 12/10/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 12/10/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12-11-28

Tooling: _____

Date: _____

Run Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
647.1700	N/C	0.00							
110		0.00							
110		0.00							
Waterjet	Memo								
FLOW CNC Waterjet	J-Cut as per Dwg								
7075 .050"	Dwg Rev: N/C								
	Prog Rev: N/C								
	2-Deburr if necessary								
120	QC2- Inspect parts off machine FAI/FAIB	0.00							
120		0.00							
QC	Memo								
Quality Control									

② B12-12-15
⑥ 0 JM 13-2-13
② B12-12-17
⑧ 0 JM 13-2-13

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	Bend	Grain	Ovalized	Pressure/Forced							
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure							
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld							
Crushed/Crimped.	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled							
Cuffs	Contamination	Maintenance	Part Moved								
Heat Treat	Countersink	Mislabeled	Positioned Wrong								
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge								
Ripples in Bend	Drill Holes	Offset									
Torque Waves in Extrusion	Drawing	Out of Calibration									
Turning Sequence	Finish	Out of Sequence									
Wave/Twist in Tube	Folio	Outside Dimensions									

Work Order ID 93801

November-27-12 11:24:48 AM

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Item ID: 647.1712

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Gusset

Stop

NS2

Start Date: 12/10/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 12/10/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

130

QC

Quality Control

QC8- Inspect parts - second check

0.00

12/10/17

6

140

140

Brake NC

Brake NC

Form as per dwg

0.00

130-13

5 11

PTO

→

150

150

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

SM

0.00

130-20

5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date: 13/05/22QA Closed: Date: 13/5/15

Work Order: <u>93801</u>	DISPOSITION	AGAINST DEPARTMENT/PROCESS				
Part No. <u>647-1712</u>	Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input checked="" type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>	
NCR No. <u>13-2601</u>						

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data					DAS 16/05/2013				
Equip/Tooling									
Operator	<input checked="" type="checkbox"/>								
Material									
Setup	13/02/13	130	3	3 piece are scrap misread during	Q57042 13/2/13	Scrap & destroy recut part	SB 13/02/13	DAS 15/05/2013	DAS 16/05/2013
Other									
Process									
Supplier									
Training									
Unapproved				1 piece crack under Boring LAD	13/2/13	<u>B118654</u> Qty x6 Scrap & destroy no replace	SB 13/02/20		Q57042 13/2/13

FAULT CATEGORY									
Landing Gear	General								
	<input checked="" type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<u>13/05/2013</u>				
	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware					
	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete					
	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Under					
	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance					
	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabelled					
	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread					
	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset					
	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration					
	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence					
	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions					
			<input type="checkbox"/>	Ovalized					
			<input type="checkbox"/>	Over/Under tolerance					
			<input type="checkbox"/>	Part Incorrect					
			<input type="checkbox"/>	Part Lost/Missing					
			<input type="checkbox"/>	Part Moved					
			<input type="checkbox"/>	Positioned Wrong					
		<input type="checkbox"/>	Power Loss/Surge						
		<input type="checkbox"/>	Other						

Work Order ID 93801

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November-27-12 11:24:48 AM

Item ID: 647.1712

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N900040100

Setup

Start *NS1*

Revision ID:

Item Name: Gusset

Stop

NS2

Start Date: 12/10/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 12/10/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

160

Outsource4

Outsource process - Anodize

Memo

0.00

PLX3-03-7

170

170

Packaging

Packaging

Receive & Inspect for Damage & Mat'l Certs

0.00

5x

60
13-4-9

180

180

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

0.00

AS
21
1349

S

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS							
			Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
			Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
			Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
			Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector	
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
FAULT CATEGORY												
Landing Gear				General								
				Bending	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>	
				Centre Not Concentric to O/S	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>	
				Cracks	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld	<input type="checkbox"/>	
				Crushed/Crimped.	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled	<input type="checkbox"/>	
				Cuffs	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>		<input type="checkbox"/>	
				Heat Treat	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>		<input type="checkbox"/>	
				Inspection Strip in Tube	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other	<input type="checkbox"/>	
				Ripples in Bend	<input type="checkbox"/>	Offset	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
				Torque Waves in Extrusion	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
				Turning Sequence	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
				Wave/Twist in Tube	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

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Item ID: 647.1712

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N900040100

Setup

Start

NS1

Revision ID:

Item Name: Gusset

Stop

NS2

Start Date: 12/10/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 12/10/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

190

190

SprayPaint

Spray Painting

0.00

5

J.R./11

13-05-16

Memo

0.00

PRIME IAW MIL-P-23377J TYPE1 CLASS N AS PER DWG. (SEE NOTE 3)

CARDINAL 4860-50 PRIMER BATCH: 125243

200

200

QC

Quality Control

QC14- Inspect Spray Paint

0.00

MM 5/15/13

(+3)

0.00

210

210

Packaging

Packaging

Identify as per dwg & Stock Location: 51522 0.00

Memo

0.00

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

SK

SP-13

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear				General							
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>							
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>							
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>							
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>							
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>								
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>								
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>									
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>									
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>									

Work Order ID 93801

93801

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November-27-12 11:24:48 AM

Item ID: 647.1712

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Gusset

Stop

NS2

Start Date: 12/10/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 12/10/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

220

QC21- Final Inspection - Work Order Release

0.00

13/5/13 20

220

QC

Quality Control

Memo

0.00

MF
13-5-13

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS																																									
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>																											
Part No. _____			Work Order Update <input type="checkbox"/>																																												
NCR No. _____																																															
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description			Sign & Date	Verification		QC Inspector																																	
Doc/Data																																															
Equip/Tooling																																															
Operator																																															
Material																																															
Setup																																															
Other																																															
Process																																															
Supplier																																															
Training																																															
Unapproved																																															
FAULT CATEGORY																																															
Landing Gear					General																																										
					Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>	Centre Not Concentric to O/S <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>	Cracks <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>	Crushed/Crimped. <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>	Cuffs <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>	Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Inspection Strip in Tube <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>	Ripples in Bend <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Torque Waves in Extrusion <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>		Turning Sequence <input type="checkbox"/>	Folio <input type="checkbox"/>	

Picklist Print

November-27-12 11:24:48 AM

Page 1

Work Order ID: 93801

Parent Item: 647.1712

Parent Item Name: Gusset

Start Date: 12/10/12

Required Date: 12/10/12

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.10.04 NEW ISSUE DD VERF:JFS

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6S.050 7075-T6 SHEET .050		Purchased	No				sf	24.4000		0.868			

Location	Loc Qty	Loc Code
MAT022	24.4	
118654	24.4	118654

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS							
				Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging	Engineering Quality Other					
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	

DART AEROSPACE LTD	Work Order:	93801
Description: Gusset	Part Number:	647.1712
Inspection Dwg: 647.1700 Rev: NC		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Recut

Measured by: B Jm	Audited by: 15	Preliminary Approval:
Date: 12-12-17 13-2-18	Date: 12-12-17	Date:
Rev Date Change	B.2 13	Revised by KJ Approved KJ
A 12.10.26 New Issue		KJ
B 12.11.26 Dimensions updated		KJ

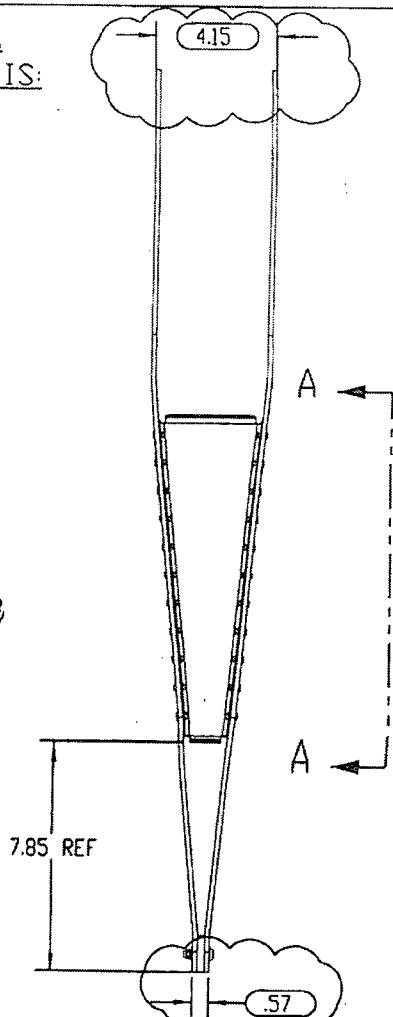
APICAL
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO. 02937				SHEET 1 OF 1
DWG NO. 647.1700		REV: NC	PREPARED BY J. JACKSON	DATE: 07/14/10
DWG TITLE: SKID DEFLECTOR ASSY				
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE	APPROVED BY: ENGR <i>John Brum</i>	MFG <i>Dan B.</i>	QC <i>Emmanuel Ligon</i>	EFF: CURRENT ORDER
REASON: REVISED F/N 8 AND NOTE 3. ADDED INSPECTION DIMENSIONS TO DRAWING VIEWS.				

SHEET 1, ZONE A1 IS:

3 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2 COLOR BLACK;
PRETREAT PRC-DESOTO PR-148 ADHESION PROMOTER, COLOR BLUE;
PRIME IAW MIL-P-23377J TYPE I CLASS N

SHEET 2,
ZONE A1 IS:



SHOP COPY
RETURN TO
ENGINEERING
CONTROLLED COPY
DIRECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
93801 MLS
12-11-28

8	R	601.1622	1	SCREW	MS27039-1-14 /
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED: <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> FMS <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR					CHANGE CATEGORY DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

NOTES:

 MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-250/12

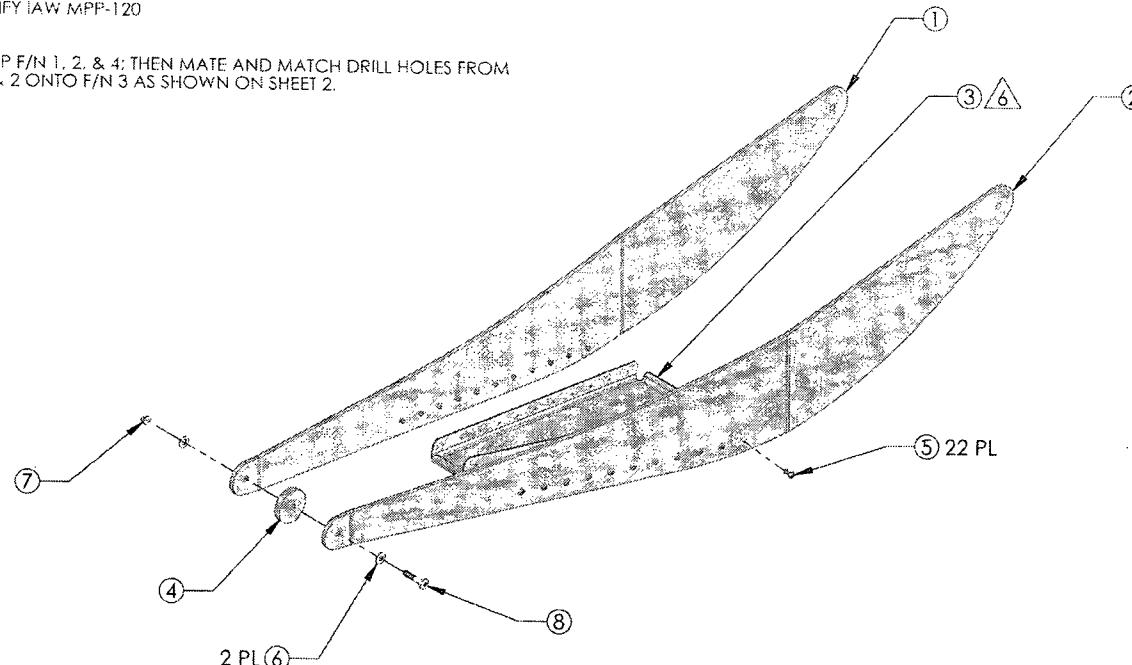
2 MATERIAL: 6061-T6 ALUMINUM BAR JAW AMS-QQ-A-250/11

3 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2,
COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER;
PRIME IAW MIL-P-23377J TYPE I CLASS N

4. DEBURR AND BREAK ALL SHARP EDGES

5. IDENTIFY IAW MPP-120

6 CLAMP F/N 1, 2, & 4; THEN MATE AND MATCH DRILL HOLES FROM F/N 1 & 2 ONTO F/N 3 AS SHOWN ON SHEET 2.



UNINCORPORATED ECN(S)

0293

				SCREW	M521009-1-12
1	8	601.2637		LOCKNUT	M521043-3
1	7	601.2943		WASHER	1A5111P0332P
2	6	601.1607		RIVET	CF3213-4-4
22	5	601.1915		SPACER	△△△△
1	4	647.1713		GUSSET	△△△△
1	3	647.1712		PLATE	△△△△
1	2	647.1711		PLATE	△△△△
1	1	647.1710		SKID DEFLECTOR ASSY	
		647.1701			
1.701	FIND #	PART #		DESCRIPTION	MATL
QTY				PARTS LIST	SPEC.
NEXT ASSY (S)					
647.1300					
ORIGINAL DATE					
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1 CAPTION					
2 DRAWING APPROVAL					
3 CHECKED					
4 DRAFTED					
5 REVISED					
6 CO-REQ CTR					
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93801

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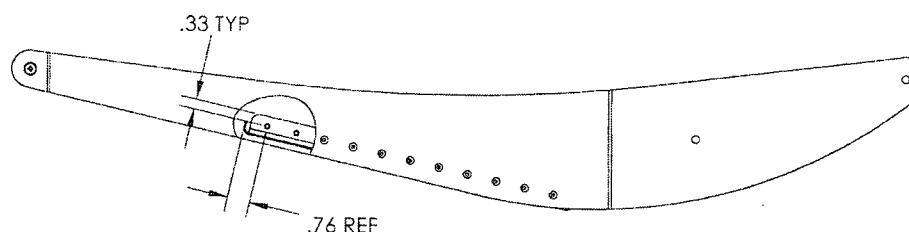
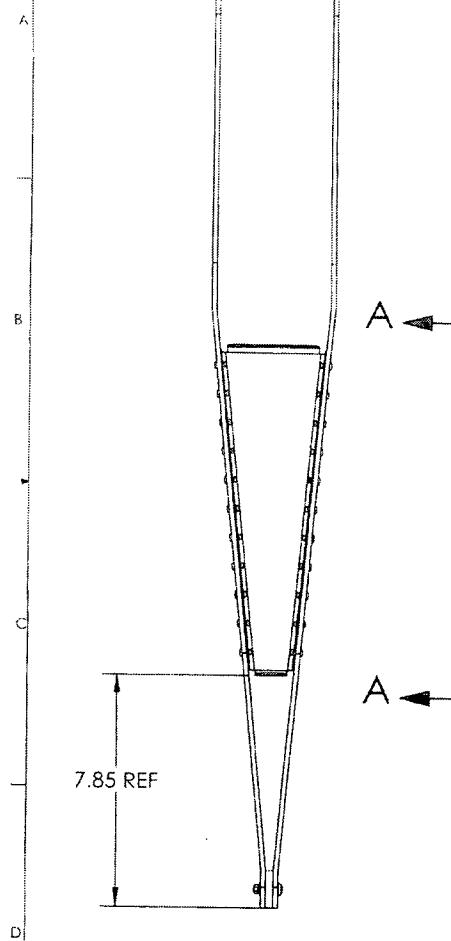
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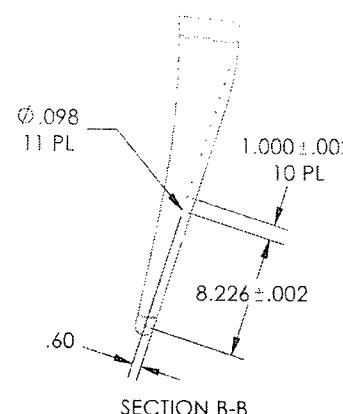
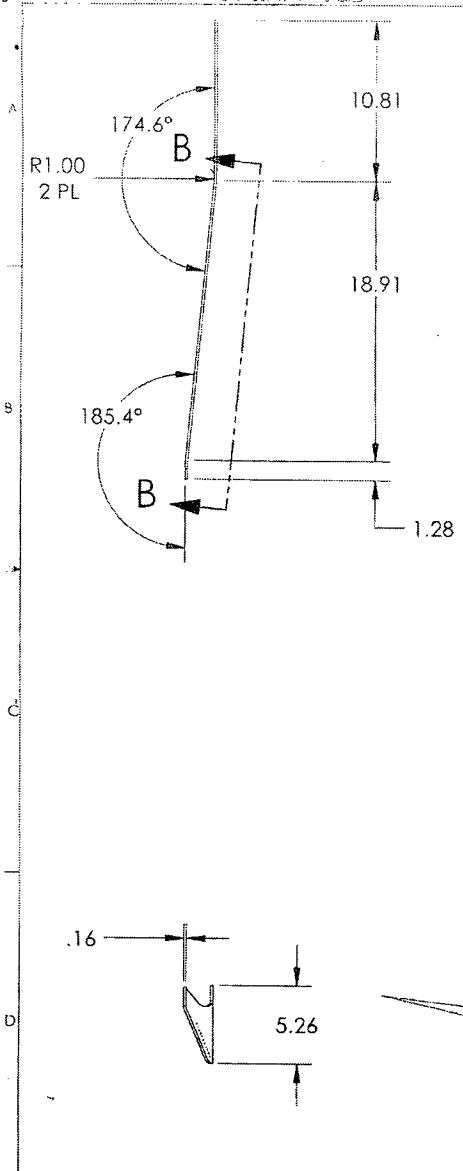
SECTION A-A

DRAWING DATE	10-02-12	REV.
DRAWN BY	CHICKER	
1. GATHERED	✓	SWVS
2. DRAWN		
3. CHECKED		
4. APPROVED		
CONTRACTING		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES 1 PLACE DECIMAL 2 PLACES DECIMAL ± .01 3 PLACES DECIMAL ± .001 ANGLES ± .5°		
SET 1 EACH COOLED D/WG. NO.		REV.
B 07M16	647.1700	N/C
SCALE NONE		SHEET 2 OF 5

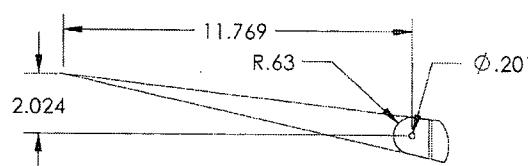
APICAL INDUSTRIES
2608 TEMPLE HEIGHTS DR.
OCEANSIDE, CA. 92056-3512 (760)724-5300

SKID DEFLECTOR ASSY

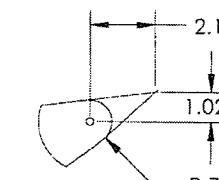
THE PEGEON CO. INC. 1970-1971
P. O. BOX 1000, NEW YORK, N.Y. 10001
TELEGRAMS: PEGEON, NEW YORK, N.Y. 10001
TELEPHONE: 212-585-1234



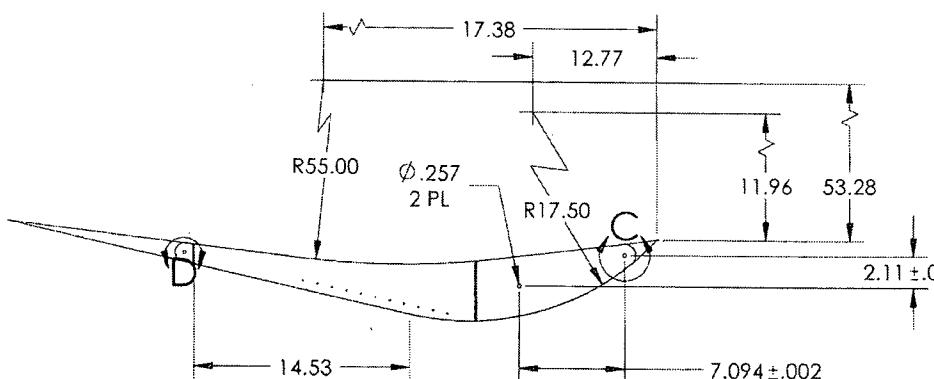
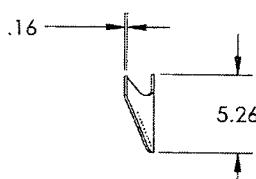
647.1711 SHOWN
647.1710 OPPOSITE



DETAIL D

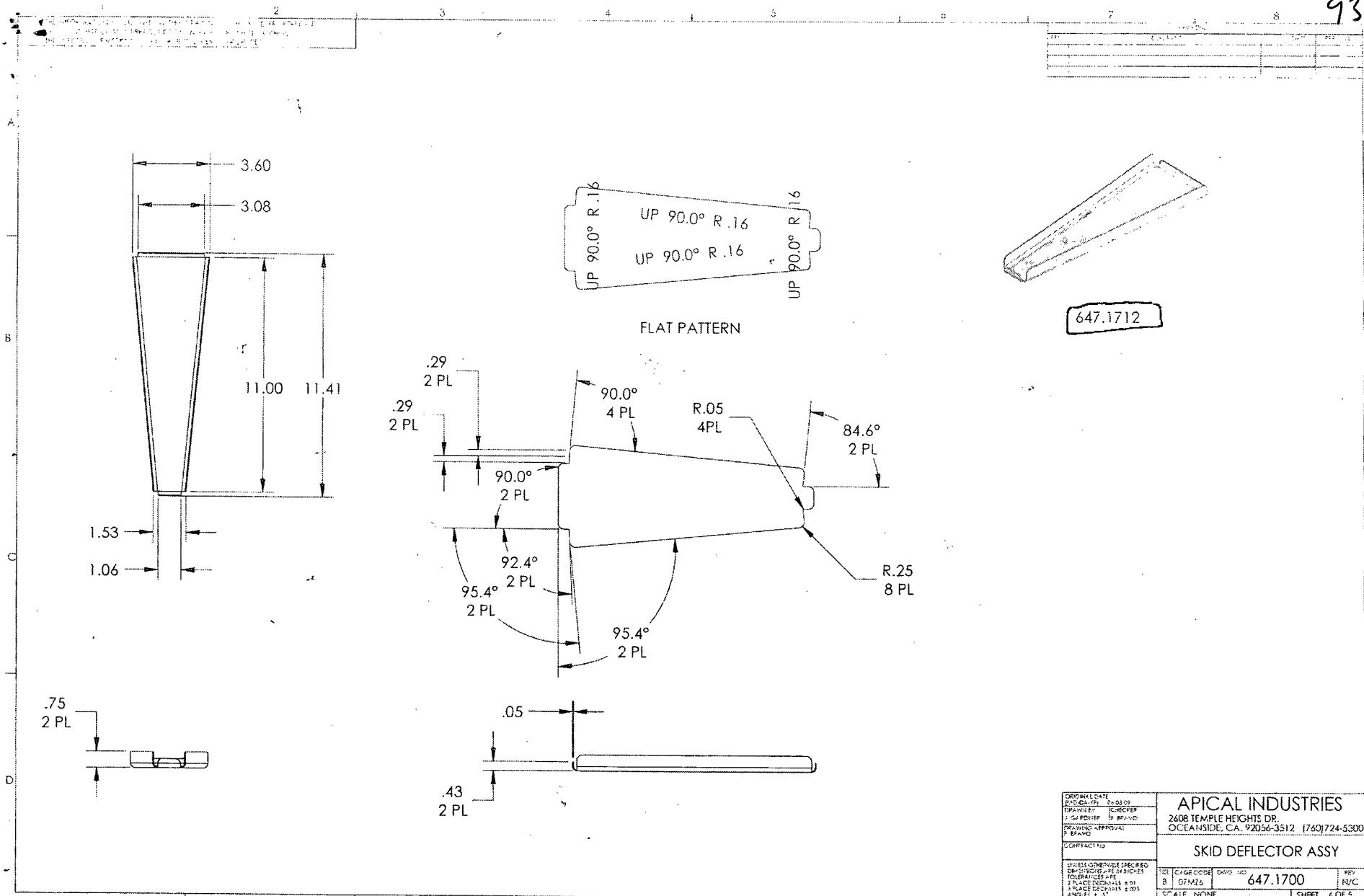


DETAIL C

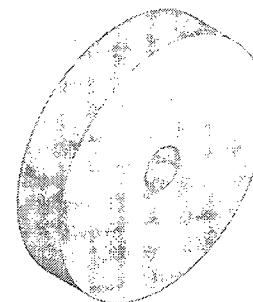
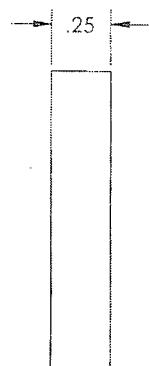


ORIGINAL DATE	10/10/76	DRAWN BY	J. GARDNER
REVISION DATE		CHECKED	P. BRAVO
REVISION NUMBER		APPROVAL	P. BRAVO
CONTRACT			
UNLESS OTHERWISE SPECIFIED			
DIMENSIONS ARE IN INCHES			
ALL DIMENSIONS ARE INCHES			
3 PLACE DECIMALS ± .000			
ANGLE ± 3°			
DATE	10/10/76	DRAWN BY	J. GARDNER
CHG CODE	B	647.1700	N/C
SCALE	1:100		
			3 OF 5

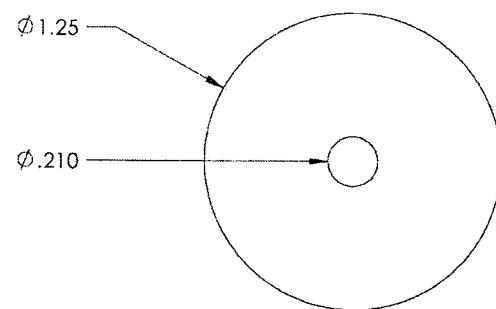
93801



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647.1713



CONTRACT DATE	APICAL INDUSTRIES
MANUFACTURER	APICAL INDUSTRIES
CHIEF ENGINEER	J. GARDNER
DRAWING APPROVAL	P. BRAVO
CONTRACT NO.	SKID DEFLECTOR ASSY
UNLESS OTHERWISE SPECIFIED TOLERANCES ARE INCHES & MILS ± ANGLE & DEGREE ± ANGLES ±	EXC. CODE: ENIG. NO. 647.1700 REV. B 07/12/00 SCALE: NONE SHEET 5 OF 5



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62300

Date: 08-Apr-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms	Ship Via
Quantity	Description
1 lot	Part: ASST 24 PCS 647.1711 15 PCS 647.1712 31 PCS 647.1910 8 PCS 647.1911 5 PCS 647.7911 12 PCS 647.1710 HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 Job: 20130197
	Rev: PO: 19280 Line:
	Certificate of Conformance A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order. ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY DATE: <u>8/9/13</u> CERTIFIED SIGNATURE: <u>MM</u> RECEIVER SIGNATURE: _____